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PTO/SB/91(10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number

Filing Date

05/11/2001

First Named Inventor

LANG

Group Art Unit

Examiner Name

Attorney Docket Number

I hereby appoint:

☐ Practitioners at Customer Number

Place Customer
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☒ Practitioner(s) named below:

Name	Registration Number
James C. Wray	22,693
Meera P. Narasimhan	40,252

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☐ The above-mentioned Customer Number.

OR

☒ Firm or
Individual Name

James C. Wray

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Country US

Telephone (703) 442-4800 Fax (703) 448-7397

I am the:

☒ Applicant/Inventor(s)

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).

SIGNATURE of Applicant or Assignee of Record

Name Thomas G. Lang James T. Lang

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of forms are submitted.

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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

First Named Inventor

LANG

COMPLETE IF KNOWN

Application Number

Filing Date

05/11/2001

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Low-Drag Hydrodynamic Surfaces

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)

Country

Foreign Filing Date (MM/DD/YYYY)

Priority Not Claimed

Certified Copy Attached?
YES NO

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☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)

Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number or Bar Code Label ☐ or ☒ Correspondence address below

Name James C. Wray

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Address Suite 300

City McLean State VA ZIP 22101

Country US Telephone (703) 442-4800 Fax (703) 448-7397

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name Thomas G. Family Name Lang
(first and middle (if any)) or Surname

Inventor's Signature *Thomas G. Lang* Date 5/10/01

Residence: City Solana Beach State CA Country US Citizenship US

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NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name James T. Family Name Lang
(first and middle (if any)) or Surname

Inventor's Signature *James T. Lang* Date 5/10/01

Residence: City Palo Alto State CA Country US Citizenship US

Mailing Address 559 Homer Avenue

Mailing Address
City Palo Alto State CA ZIP 94301 Country US

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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